

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/500,795

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		12				
4		52				
5		20				
6		02				
7		10				
8		0				
9		10				
10		02				
11		0				
12		0				
13		20				
14	1	1				
15	+	1				
16	+	1				
17	+	1				
18		1				
19	1	2				
20	1	+				
21	1					
22						
23	1					
24		1				
25						
26		2				
27						
28						
29	1					
30						
31						
32						
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48						
49						
50						
TOTAL IND.	6					
TOTAL DEP.	20					
TOTAL CLAIMS	26					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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97						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

U.S. DEPARTMENT OF COMMERCE

BEST AVAILABLE COPY